Child maltreatment and risk patterns among participants in a child abuse prevention program[☆]

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A B S T R A C T

The relationship between risk factors and Child Protective Services (CPS) outcomes in families who participate in home visiting programs to prevent abuse and neglect and who are reported to CPS is largely unknown. We examined the relationship between parental risk factors and the substantiation status and number of CPS reports in families in a statewide prevention program. We reviewed CPS reports from 2006 to 2008 for families in Connecticut's child abuse prevention program. Six risk factors (histories of CPS, domestic violence [DV], mental health, sexual abuse, substance abuse, and criminal involvement) and the number of caregivers were abstracted to create risk scores for each family member. Maltreatment type, substantiation, and number of reports were recorded. Odds ratios were calculated. Of 1,125 families, 171 (15.6%) had at least one CPS report, and reports of 131 families were available for review. Families with a substantiated (25.2%) versus unsubstantiated (74.8%) first report had a high number of paternal risk factors ($OR = 6.13$, 95% CI [1.89, 20.00]) and were more likely to have a history of maternal DV ($OR = 8.47$, 95% CI [2.96, 24.39]), paternal DV ($OR = 11.23$, 95% CI [3.33, 38.46]), and maternal criminal history ($OR = 4.55$; 95% CI [1.32, 15.60]). Families with >1 report (34.4%) versus 1 report (65.6%) were more likely to have >3 caregivers, but this was not statistically significant ($OR = 2.53$, 95% CI [0.98, 6.54]). In a prevention program for first-time families, DV, paternal risk, maternal criminal history, and an increased number of caregivers were associated with maltreatment outcomes. Targeting parental violence may impact child abuse prevention.

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Introduction

Home visiting programs have been developed in an attempt to prevent child abuse and neglect through home-based parenting programs, parenting curricula, emotional support, and linking families to community services (Avellar & Supplee, 2013; Donelan-McCall, Eckenrode, & Olds, 2009; MacMillan et al., 2005). These programs have traditionally targeted families that are at high-risk of perpetrating child maltreatment. These high-risk families are generally identified by the presence of certain sociodemographic characteristics, such as poverty or young maternal age, which have been shown to be associated with an increased risk of child maltreatment (Brown, Cohen, Johnson, & Salzinger, 1998). Several outcome measures have been used to assess program efficacy including parental reports of behaviors toward the child (DuMont et al., 2008), the

occurrence of injuries resulting in visits to the emergency department or hospitalizations (Kitzman et al., 1997; Matone, O'Reilly, Luan, Localio, & Rubin, 2012), and reports to Child Protective Services (CPS) (Duggan et al., 2004, 2007; Gonzalez & MacMillan, 2008; Olds, Henderson, Kitzman, & Cole, 1995).

In this article, we focus on a different aspect of home visiting programs by examining families that were enrolled in a state-wide home visiting program to prevent abuse and neglect and that were reported to CPS. Specifically, we examined the risk factors in those reported to CPS and the associations between risk factors and substantiation and between risk factors and more than one report to CPS.

Risk Factors for Abuse and Neglect

There is a comprehensive literature on the risk factors for abuse and neglect, and four major domains of risk have been identified: (a) child characteristics (e.g., prematurity, disability), (b) parental characteristics (e.g., mental health problems, substance use, maltreatment during childhood), (c) family characteristics (e.g., DV, absent father), and (d) social characteristics (e.g., poverty, violent neighborhoods; Belsky, 1980). Studies in the United States and the United Kingdom have examined these risk factors by following families longitudinally. For example, in the United States, Brown et al. (1998) examined the outcomes of abuse and neglect of children who were enrolled in a longitudinal study at ages 1–10 years in 1975 and were followed with periodic interviews. In 1991–1993, data about child maltreatment were obtained from interviews of those over 18 years of age and records from the state's CPS agency. Many risk factors were associated with the occurrence of abuse or neglect, and children with at least four risk factors were 8 times more likely to have experienced maltreatment compared to those with no risk factors. Risk factors with an odds ratio of greater than 2.5 included parental characteristics: maternal sociopathy, which included drug, alcohol, or police involvement (*OR* = 4.91), maternal dissatisfaction (3.15), and low maternal education (3.09); family characteristics: early separation from mother (2.80), low father involvement (3.14), and low father warmth (2.57); and social characteristics: being on welfare (5.14) and low income (3.02) (Brown et al., 1998).

In a more recent study from the United Kingdom, Sidebotham, Heron, and ALSPAC Study Team (2006) used data from the Avon Longitudinal Study of Parents and Children (ALSPAC) to examine risk factors for children who were reported for suspected maltreatment or placed on the local CPS registry by 6 years of age. Data were obtained on 14,256 children whose mothers were enrolled prenatally; 259 children were reported for suspected maltreatment, and 115 of these were placed on the local registry. Risk factors for being placed on the registry included child characteristics: low birth weight (*OR* = 2.23) and few positive attributes reported (1.97); parental characteristics: low educational achievement (4.96), young age (3.41), history of psychiatric illness (2.82), and history of childhood abuse (1.86); family characteristics: single mother (2.64) and reordered family (2.58); and social characteristics: social deprivation (11.02) and poor social network (1.93). The odds ratio for the risk factor of DV was elevated at 1.60, but this result was not statistically significant. The risk factors for reporting suspected maltreatment were similar to those for being listed on the child abuse registry (Sidebotham et al., 2006).

Based on these studies of risk factors, concerns about the links among family violence, substance abuse, and maltreatment (Connelly et al., 2006; Dubowitz et al., 2011; Laslett, Room, Dietze, & Ferris, 2012; U.S. Department of Health and Human Services, 2013), and data that were available in our study about parental characteristics, we focused on six risk factors: (a) parent's CPS history as a child, (b) DV history, (c) mental health history, (d) sexual abuse history, (e) substance abuse history, and (f) criminal history.

Reports to CPS as the Outcome of Child Maltreatment

The accuracy of using CPS reports to approximate abuse and neglect has been debated for several reasons. First, CPS reports may underestimate and overestimate the actual rates of abuse and neglect. Underestimation may occur if levels of maltreatment exist that do not lead to a CPS report, but, in fact, may cause harm to the child. Overestimation can result from the fact that the families in prevention programs may have greater contact with mandated reporters than non-participating families, thus leading to surveillance bias in the reporting of maltreatment in the families with home visitors (Chaffin & Bard, 2006).

Second, it is unknown whether the severity of child maltreatment is more accurately measured by the frequency with which maltreatment occurs (estimated by the number of maltreatment reports) or by whether a report is substantiated (meaning that there is sufficient evidence to indicate that abuse has occurred; Drake, Jonson-Reid, Way, & Chung, 2013; Hussey et al., 2005). This debate arises, in part, from the fact that both substantiated and unsubstantiated maltreatment can result in negative consequences for the child (Jonson-Reid, Kohl, & Drake, 2012; Smith, Ireland, & Thornberry, 2005). Although substantiation is meant to reflect that maltreatment has occurred, substantiation of a CPS report may be more reflective of the process and biases inherent in the CPS investigation rather than the severity of the maltreatment (Drake, 1996). Therefore, it has been suggested that the recidivism of maltreatment (represented by the presence of multiple CPS reports) may be a more appropriate way to risk stratify families involved with CPS (Hussey et al., 2005; Jonson-Reid et al., 2012).